

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Mr. G</i>		<i>10/12/00</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>10/30</i>
FORMALITY REVIEW	<i>Mr</i>	<i>875</i>	<i>11/14/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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